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ABSTRACT

Noting that children growing up with an alcoholic parent often suffer from underdeveloped perceptual skills, unhealthy self-concepts, and low self-esteem, a study examined the impact of an alcoholic family environment on the ability of adult children of alcoholics (ACOAs) to communicate interpersonally. The Communicator Style Measure (CSM) was used to test the hypothesis that individuals self-identified as adult children of alcoholics demonstrate a unique communicator style, characterized by scores in the dominant, impression leaving, open, and communicator image domains. Subjects were 518 public speaking students at a western urban university, 74 of whom (14.3%) identified themselves as ACOAs. All subjects completed a packet containing the CSM and a family health history questionnaire. Communicator styles of ACOAs--as measured by the CSM--were compared to the CSM results for a random sample of individuals not identified as children of alcoholics. Results supported the hypothesis by indicating a unique communicator style associated with adult children of alcoholics and characterized by self-perceptions of passive and unimpressive communicative behavior. Results reflect the tendency of ACOAs to perceive themselves as less effective communicators than individuals in the comparison group. (AEW)

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Identification and Evaluation of Communicator Style in Adult Children of Alcoholic Parents

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Running Head: ACOA COMMUNICATOR STYLE

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Abstract

This study examined the level of impact an alcoholic family environment has on the development of communicator style in adult children of alcoholic parents. Utilizing self-report measures four variables (dominance, impression leaving, openness and communicator image) were hypothesized to be key predictors of a unique ACOA communicator style. Discriminant anaylsis revealed that two of the four variables, dominance and impression leaving, were significant predictors of ACOA group membership. A third variable, communicator image, also correlated significantly with the discriminant function, although it was not selected as a predictor variable due to suppression effects. The fourth variable, openness, was not significant.

Identification and Evaluation of Communicator Style in Adult Children of Alcoholic Parents

Alcoholism presently ranks third, behind cancer and heart disease, as the leading health problem in the United States (Lawson, Peterson & Lawson, 1983). The American Medical Association (1977) describes it as an illness resulting from the persistent and excessive use of alcohol characterized by significant impairment involving physiological, psychological or social dysfunction. The Johnson Institute (1972) recognizes alcoholism as a primary and progressive disease which is fatal if left untreated. Because of the pervasive nature of this disease, alcoholism impacts a variety of groups in a number of ways. In the workplace, the classroom, the social arena and the home, repercussion increases at an alarming rate. Yet by the very nature of this disease, the group that is forced to pay the dearest price is the alcoholic's family.

The impact of alcoholism upon family process has been explored by several disciplines including psychology (Jackson, 1956; Gorad, 1971; Weber, 1983), psychiatry (Jacob, Favorini, Meisel & Anderson 1978; Franks & Thacker, 1979; Wolin, Bennett, Noonan & Teitelbaum, 1980), sociology (Cork, 1969a; Albon, 1979; Downs, 1982), and medicine (Goodwin, 1981; Finley, 1983). Within the context of family interaction the majority of this work has focused upon comprehension of the disease as it effects the alcoholic, primarily, and the alcoholic's spouse, secondarily. However, growing awareness is beginning to highlight the entire family unit as critical to the understanding of alcoholism (Lawson et al., 1983). As a result, researchers and therapists are beginning to document the impact an

alcoholic home can have on the social and psychological development of children (Cork, 1969b; Bosma, 1972; Black, 1979; Orme & Rimmer, 1981; Wilson, 1982; and Woititz, 1983). In addition, recognition of this unique population known as children of alcoholics (COA's) has given way to the realization that as these children move developmentally into adulthood the influence of their alcoholic family-of-origin extracts a heavy toll. Experts agree (Black, 1981; Wegscheider, 1981; Woititz, 1983) that this particular group warrants more in-depth investigation than it has attracted in the past.

The present study is concerned with the lack of information about alcoholic family interaction, in general, and the impact of this interaction on adult children of alcoholics (ACOA's), in particular, from an interpersonal communication perspective. Behavior associated with alcoholic interaction clearly reflects unhealthy communication patterns. Within the rigid, rule-bound communication environment which is characteristic of alcoholic families (Wegscheider, 1981), very few opportunities lend themselves to the development of effective interpersonal skills. Honest and direct communication is rarely, if ever encouraged. Interaction is characterized by circumspection. Spontaneous self disclosure occurs infrequently if at all. Open expression of intimacy and affection is often nonexistent. The self is generally seen as worthless by each parent and this message is often internalized by children, who react by blocking interaction with others (Wegscheider, 1981). These characteristics have been associated with alcoholic interaction by a variety of disciplines. Yet, to date, communication concepts have been applied to this investigation in only a cursory manner. This investigation seeks to

begin filling that gap.

Researchers agree (Black, 1981a, 1981b; Greenleaf, 1981; Woititz, 1983; Gravitz & Bowden, 1985) that children growing up in an alcoholic home suffer from underdeveloped perceptual skills as reflected in their failure to acquire a healthy self-concept, and high self-esteem. In that the foundation of the interpersonal communication process is rooted in perception, impaired perceptual skills will influence the acquisition of effective communication skills. In turn, these skills which may be fundamentally inadequate could negatively impact all levels of adult relationship (e.g. social, professional, intimate).

The purpose of this study is to examine the level of impact an alcoholic family-of-origin has on the ability of ACOA's to communicate interpersonally. To do so, the specific behavior these individuals perceive themselves to exhibit in an interpersonal context will be investigated. The conceptual framework for this research is provided by Norton's (1978, 1983) concept of communicator style. This construct and the resulting measure specifically address how an individual perceives self as a communicator, and presents a variety of style categories within which the individual may fall. Essentially, the Communicator Style Measure (Norton, 1983) creates a communicator style profile based on self-perceived interaction performance. This measure will be employed to determine if a specific style of communication can be identified and classified as "unique" to ACOA's. In essence, this research yields a preliminary examination of the relationship between alcoholic family interaction and adult communicator style.

The following two sections highlight literature relevant to the development of interpersonal skills in children of alcoholics, and communicator style respectively.

Adult Children of Alcoholics

The children of alcoholics are those individuals (toddlers, adolescents or adults) whose families-of-origin were characterized by alcoholism (Finley, 1983). It is estimated that between 28 and 34 million people in the United States have been or are presently being reared in an alcoholic home (Black, 1981a). Literature reporting on clinical observations (Ackerman, 1983; Cork, 1969a; Greenleaf, 1981; Jacob et al., 1978; Nardi, 1981; Newell, 1950) and empirical findings (Chafetz, Blane & Hill, 1971; Fine, Yudin, Holmes & Heinemann, 1976) suggests that these individuals reflect difficulty in acquiring identity, in personality formation, in role performance, and with relationship development. Additional research indicates that children of alcoholics are affected in their level of trust, security, self-esteem and confidence in others as a result of the inconsistency and unpredictability of parental expectations and support in the alcoholic home (Albon, 1976; Fox, 1962; McCord, 1972). Clinicians agree (Black, 1981b; Gravitz & Bowden, 1985; Woititz, 1983) that as these individuals are removed from their alcoholic family-of-origin and proceed into adult life they carry with them a set of interpersonal skills which are primarily deficient. This suggests a negative influence on the acquisition of satisfactory and competent perceptual and communication skills in adult children of alcoholics. Such an influence will be reflected in the individual's communicator style.

Communicator Style

Communicator style, according to Norton (1983), is simply the way one communicates; "it can be broadly defined as the signals that are provided to help process, interpret, filter or understand literal meaning" (p.47). In essence, style gives "form" to literal meaning in the context of communication interaction. Communicator style offers a vehicle for understanding interpersonal relationships and heightening intrapersonal awareness.

The original statement of Norton's construct reflects an integration of five major studies (Bales, 1970; Leary, 1957; Lieberman, Yalom & Miles, 1973; Mann, Gibbard & Hartman, 1967; and Schutz, 1958) and additional supporting literature (see Norton, 1978 and Norton, 1983 for a full review of this literature). Nine independent variables (dominant, dramatic, animated, open, contentious, relaxed, friendly, attentive and impression leaving) and one dependent variable (communicator image) operationally define the construct. Literature contributing to the formation of a communicator style domain is extensive for some variables (dominant, animated, open and friendly), and sparce or nonexistent for others (contentious, impression leaving).

The communicator style construct provides a useful framework for examining an individual's self-perception as a communicator in interpersonal settings. In that the purpose of this study is to explore the relationship between alcoholic family interaction and resulting styles of communication that adult children of those families develop, a tool

designed to measure communicator style is appropriately applied. Results of this measure should yield insight as to specific characteristics associated with a unique ACOA style.

Hypothesis and Operational Definitions

The literature points out that children of alcoholics may exhibit impaired social and interpersonal skills as reflected in identity acquisition, personality formation, and relationship development among other areas. As a result, they are likely to be seen as untrusting, untruthful, unconfident and closed. These qualities are in direct opposition to several of the variables constituting the communicator style construct. With this in mind, the following observations are offered about communicator style and adult children of alcoholics.

If children growing up in an alcoholic home are not encouraged to express themselves in honest, open, direct and affectionate ways; and if the rules dictated, and roles portrayed by parents convey messages characterized by tension, anxiety, secrecy and vulnerability then development of an interpersonal style of communication will be impacted. These children would probably not perceive themselves to be dominant, or open communicators. Nor would they be likely to consider themselves as leaving much of an impression on someone else in a communication exchange because of their relative need or direct order to become transparent in the alcoholic home. Specifically, these observations suggest that ACOA's may exhibit communicative behavior which reflects lower scores on the dominant, open, and impression leaving dimensions of the communicator style measure. The communicator image dimension addresses the individual's overall

assessment of self as a communicator. It would seem reasonable given the aforementioned constraints on interpersonal skill development that ACOA's would also perceive themselves as "poor" rather than "good" communicators, and would therefore receive lower scores on that dimension.

These four variables have been purposefully singled out from the remaining six style subconstructs. According to the design of the style measure, an individual's general self-evaluation of communicator style can be reflected in an overall assessment of communicator image. Norton's (1978, 1983) research has determined that the best predictors of communicator image are reflected in the dominant, open and impression leaving dimensions. It has already been posited that due to the nature of these three communicator style characteristics, adult children of alcoholics are likely to score lower on all three of these dimensions. Further, it follows that if these three variables are closely linked as strong predictors of communicator image, and image is a reflection of communicator style, then scores in the dominance, impression leaving and open domains should yield additional prediction of a unique ACOA style of communication. With this in mind the following hypothesis is offered:

H: Individuals self-identified as adult children of alcoholics demonstrate a unique communicator style. This unique style of communication as determined by the Norton Communicator Style Measure can be characterized, most significantly, by scores in the dominant, impression leaving, open and communicator image domains.

Operational Definitions. Adult children of alcoholics (ACOA's) were identified by responses to a family health history questionnaire. Operationally these individuals were self-identified by indicating on the health questionnaire that their mother, father, or both parents presently have or are recovering from the disease of alcoholism. Communicator style refers to "the way one verbally, nonverbally, and paraverbally interacts to signal how literal meaning should be taken, interpreted, filtered, or understood" (Norton, 1983, p. 58). The Communicator Style Measure (CSM) was used to operationalize a communicator style unique to adult children of alcoholics. The CSM is a 47-item paper-and-pencil test using a 5-point Likert-type response scale developed and refined by Norton (1978, 1983). In this measure 4 items are summed for each of the 9 independent variables (friendly, impression leaving, relaxed, contentious, attentive, animated, dramatic, open, dominant); 5 items are summed to obtain an index score for the dependent variable (communicator image).

Through the application of the Communicator Style Measure and a family health history questionnaire, the emergence of a particular communicator style unique to adult children of alcoholics was investigated, quantified and contrasted to a comparison group. This particular ACOA communicator style was evaluated in light of the individual's overall assessment of perceived communication ability (communicator image), as well as through the degree of correlation existing within the ACOA population to specific style variables (dominant, impression leaving and open).

Method

Participants

Five hundred and eighteen undergraduate students enrolled in the introductory Public Speaking course at an urban university in the western United States participated in this study. Participation was voluntary, and responses were anonymous.

In the United States, more than ten percent of the population is being raised in an alcoholic home (Ackerman, 1983). With this in mind it was estimated that from an overall sample of 518 participants at least 50 individuals (approximately 10%) would self-identify as adult children of alcoholics. In fact, 74 self-identified ACOA's emerged (14.3%).

Procedures

Participants received and completed a packet containing the CSM and the family health history questionnaire. Written instructions on the packet were reinforced by oral instructions and questions were addressed as necessary. Information about the nature of the study and its results was provided to the participants after analysis of the data had been completed.

Measures

This research was carried out through the utilization of two separate measures. Each participant completed the Communicator Style Measure (Norton, 1983) and a family health history questionnaire, which was developed by the researcher. The questionnaire requested general demographic information in addition to the participant's response as to whether their father, mother, both parents, or siblings suffered from one or more of fourteen major illnesses including alcoholism.

Data Analysis

Descriptive data analysis was applied to the raw data for the purpose of examining skew, and other descriptive statistics. Cross-tabulation analysis was performed to determine if the ACOA sample (n=73) was demographically different from the remaining general sample. The analysis revealved that the two groups differed slightly in age (Kendall's Tau = .0111 with $p<.05$), but this did not demand the creation of a stratified proportional comparison sample. Therefore, a random comparison sample (n=77) was drawn from the remaining responses.

All eleven scales comprising the style measure were analyzed for reliability using Cronbach's alpha. Intercorrelations of scales were determined through Pearson product-moment correlational analysis. Subjects classified in group 1 (self-identified ACOA's) and group 2 (random sample of non-ACOA's) were submitted to discriminant analysis with an alpha level of .05.

From the original raw data set (n=518) 74 individuals self-identified as adult children of alcoholics. Before the comparison group was selected, twelve cases containing missing CSM data were dropped from the sample. One of those cases was a self-identified ACOA.

Results

Reliability and Correlational Analysis

Internal consistency reliability for each scale in the CSM was computed using Cronbach's alpha. Four of the scales yielded only moderate reliability (friendly = .57; attentive = .54; animated = .57; dramatic = .62), and the remaining six scales reflected acceptable reliability

(contentious = .69; impression leaving = .77; relaxed = .70; open = .76; dominant = .72; communicator image = .73). Alpha for the attentive scale was slightly improved (from .54 to .59) by dropping one item from the scale. Scale means and standard deviations for ACOA's and the randomly selected comparison group are presented in Table 1.

Insert Table 1 About Here

Pearson product-moment correlational analysis was applied to the style scales to measure variable intercorrelations. Table 2 summarizes the resulting correlational matrix, coupled with scale reliability value. As is presented, the analysis reflected strong correlations between the communicator image and dominance variables (r = .57) as well as between communicator image and impression leaving (r = .43). These correlations suggested that one or more of these variables might be suppressed when they are entered in the discriminant analysis.

Insert Table 2 About Here

Homogeneity of Variance

Prior to the discriminant analysis a preliminary test of equality of group covariance matrices using Box's "M" was performed to examine homogeneity of variance. Results indicated that the covariance matrices for the 2 groups were not significantly different (chi-square = 58.244, DF = 45, p = .16). This is critical in that one of the underlying assumptions of discriminant analysis is that the population variance-

TABLE 1

STYLE SCALE MEANS AND STANDARD DEVIATIONS FOR

ACOA'S AND COMPARISON GROUP

VARIABLE	ACOA* MEAN	ACOA STANDARD DEVIATION	COMPARISION GROUP** MEAN	COMPARISON GROUP STANDARD DEVIATION
Friendly	14.40	2.22	14.91	2.32
Impression Leaving	13.57	2.52	14.45	2.37
Relaxed	12.47	1.73	12.59	2.04
Contentious	13.04	3.03	13.26	3.46
Attentive	11.04	1.83	10.86	1.83
Animated	13.85	2.42	13.91	2.52
Dramatic	12.76	2.95	12.63	3.22
Open	12.15	2.22	12.71	2.38
Dominant	11.18	2.73	12.55	2.73
Communicator Image	16.21	3.36	17.37	3.25

* $\underline{n} = 73$
** $\underline{n} = 77$

TABLE 2

CORRELATION MATRIX AND RELIABILITIES OF CSM

	Friendly	Impression Leaving	Relaxed	Contentious	Attentive	Animated	Dramatic	Open	Dominant	Communicator Image
Friendly	57*									
Impression Leaving	.30	77								
Relaxed	.13	.07	70							
Contentious	.03	.18	-.04	69						
Attentive	.49	.23	.02	.12	59					
Animated	.38	.27	.01	.18	.26	57				
Dramatic	.33	.32	.09	.22	.19	.54	62			
Open	.33	.23	.11**	.09	.10	.28	.24	76		
Dominant	.24	.47	-.09	.19	.10	.32	.46	.27	72	
Communicator Image	.47	.43	.10	.24	.33	.37	.36	.31	.57	73

* Diagonal elements represent Cronbach's alpa for internal consistency reliability.

** Correlation of .11 or greater is significant at the .05 level.

covariance matrices are equal, reflecting homogeneity of the population dispersions (McLaughlin, 1980).

Discriminant Analysis

Utilization of a stepwise discriminant method revealed five of the ten variables as predictors (friendly, impression leaving, attentive, dramatic and dominant). It was hypothesized that the open and communicator image variables would prove significant predictors along with dominance and impression leaving. It will be noted that the former two variables were not selected for inclusion in the discriminant analysis by the program. Recalling the high intercorrelation between communicator image and dominance ($r = .57$), and between communicator image and impression leaving ($r = .43$) it can be concluded that the communicator image variable represented substantial redundancy, and for this reason was suppressed during the analysis. The open variable was simply determined to be too weak as a predictor variable.

The overall test of the hypothesis is reflected in the canonical discriminant function. The function was significant beyond an alpha level of .05, yielding the following results: canonical correlation = .32; Wilks' lambda = .90; chi-square = 15.41; DF = 5; $p = .009$.

Examination of the discriminant function group means (group 1 = - .34; group 2 = .32) indicated that positive signs favored the comparison group. This revealed that the comparison group tended to outscore ACOA's on the dominant, impression leaving, communicator image, friendly, open, animated and contentious style scales. ACOA's tended to have higher scores than the comparison group on the attentive, dramatic and relaxed scales.

Correlations between style variables and the discriminant function are summarized in Table 3. Using a correlation cutoff point of .40 indicated that the dominant (r = .70), impression leaving (r = .55) and communicator image (r = .40) variables were sufficiently correlated with the function. Although the open variable did not meet the cutoff criterion (r = .22) it was correlated with the function in the predicted direction.

Insert Table 3 About Here

The summary of discriminant group classification is illustrated in Table 4. This report of group membership as assigned through the application of weighted predictor variables revealed that error of classification varied about the same for each group (group 1 = 38.4%; group 2 = 33.8%), yielding significant accuracy of group classification at 64% (chi-square = 3.92, DF = 1, $p<.05$). The error rates implied that misclassification was likely due to random error rather than to any sort of systematic error.

Insert Table 4 About Here

Discussion

This study measured communicator style in a sample of self-identified adult children of alcoholics, and compared those results to CSM results of a random sample of individuals not self-identified as adult children of alcoholics. Following a survey design independent variables representing

TABLE 3

STRUCTURE MATRIX

Style Variable	Function 1 Correlation*
Dominant	.70
Impression Leaving	.55
Communicator Image	.40
Friendly	.26
Open	.22
Attentive	-.18
Animated	.07
Dramatic	-.06
Relaxed	-.06
Contentious	.04

*Note: This reflects pooled within groups correlations between canonical functions and variables. Variables are ordered by the function with the largest correlation.

TABLE 4

SUMMARY OF DISCRIMINANT CLASSIFICATION

Actual Group	No. of Cases	Predicted Group Membership 1	2
Group 1 (ACOA's)	73	45	28
		61.6%	38.4%
Group 2 (Comparison)	77	26	51
		33.8%	66.2%

Percent of Grouped Cases Correctly Classified: 64%

style behaviors characterized by openness, dominance, impression leaving and communicator image were hypothesized to be significant predictor variables in determining, through discriminant analysis, the dependent variable of ACOA versus non-ACOA group membership.

The hypothesis was supported to the extent that a "unique" communicator style associated with adult children of alcoholics can be defined, significantly, as a style characterized by self-perceptions of passive (low dominant) and unimpressive (low impression leaving) communicative behavior. Specifically, two of the four variables, dominance and impression leaving, were significant predictors of a style of communication associated with individuals classified as adult children of alcoholics.

Although a third variable, communicator image, was not found to be a significant predictor variable of an ACOA communicator style, it was found to be highly correlated with the two variables that were significant. It should be noted that communicator image was also sufficiently correlated with the discriminant function assigning group membership. With this in mind it can be observed that self-evaluation of communicator image does contribute to the identification of a unique ACOA communicator style. Results reflect the tendency of adult children of alcoholics to perceive themselves as less effective communicators (low communicator image) than individuals in the comparison group.

The fourth variable, openness, did not achieve significance in level of prediction or a sufficient correlation with the discriminant function, albeit that correlation was in the predicted direction. Perhaps the weak level of predictability this variable yields is in part a reflection of the slightly older age of the ACOA group. This age

difference may reflect a higher level of maturity, self-acceptance, and trust. If so, this could partially account for a slightly higher self-evaluation of openness than was predicted. Participants in this research may also have been unclear about the definition of or reference to "open" communicative behavior as they were completing the style measure. Or if, if fact, the concept of openness was clearly understood, some degree of social desirability may have been operating reflecting the individuals' desire to transcend the negative connotation a self-perceived style of communication that is less open projects.

Implications for adult children of alcoholics

Results of this study imply that adult children of alcoholics may exhibit a style of communication characterized by behavior that is less dominant and less impression leaving than individuals not raised in an alcoholic family setting. In addition, ACOA's tend to perceive themselves as having a less positive communicator image than other individuals perceive themselves to have. All three of these conclusions essentially confirm observations already reported in the literature, and offer an initial (albeit sketchy) framework for the identification of an ACOA communicator style.

Having revealed this, what particulars can be suggested about the way an individual exhibiting this style actually communicates? Norton's (1983) discussion of dominant, impression leaving and communicator image behavior offers the following observations. Low dominant communicative behavior can be characterized through such nonverbal cues as indirect eye contact, incongruent body movements and lack of voice projection. The less dominant communicator is likely to be more compliant and less assertive, as

well as less competitive, less forceful and less enthusiastic both verbally and nonverbally. An individual exhibiting low impression leaving communicative behavior is less likely to be remembered after an initial encounter, may engage in only a low level of verbal communication supplemented by subtle nonverbal cues, and would not be considered particularly lively or conversationally strong. Finally, an individual with a less positive self-perception of communicator image will probably be somewhat uncomfortable interacting in almost any setting ranging from greeting acquaintances to conversing with intimates.

Within the spirit of behavior interpretation so as to encourage change and growth, the following preliminary evaluation of the identified ACOA communicator style this study yields, is offered. Prior to implementation of this investigation suggestion was made that the influence of growing up in an alcoholic family presented the potential of creating communicative liabilities for children of alcoholics. It was observed that these individuals might perceive themselves as less effective communicators given the rule and role constraints they were obliged to obey within the family system. This observation was generally supported. What, then, might this mean for adult children of alcoholics? Characteristics associated with this style would clearly have adverse affects on the development of professional, social and intimate relationships. As a result, the accomplishment of important interpersonal goals may be blocked. Communicative competence and communication satisfaction will be impacted. Ultimately, these individuals may forfeit the experience of gratifying, healthy interpersonal communication.

Limitations of the study

There are always limitations in research. Specific to this study are concerns involving the self-report nature of the data collection process, ramifications of individual family profiles, and the implications this denial-based disease has for comparison group contamination.

Children of alcoholics do not generally develop a positive or necessarily realistic self-perception because of the impact of the disease on the overall functioning of the family system. This distorted sense of self will influence any type of self-report measurement, such as the one utilized in this study. Individual characteristics of the alcoholic family units probably affected results of this study. These characteristics include such things as birth order and where the individuals measured in this study fall in that order; whether the mother, father, or both parents are alcoholic; the time of onset and duration of the parental alcoholism; and gender differences of tested ACOA's. These factors effect family communication patterns and as such have a direct bearing on this research. Finally, because alcoholism is a denial-based disease some of the subjects in the randomly selected comparison group of non-ACOA's may in fact be adult children of alcoholics themselves. This could certainly impact the results used to compare the two groups.

Future Research

The foundation of this research was based upon questions concerning the disease of alcoholism and its relationship to dysfunctional communication patterns within the family system. Alcoholic interaction was thought to contribute to underdeveloped and dysfunctional interpersonal communication skills in children who are a product of that family system.

Initial inquiry has been addressed but larger questions remain. What additional variables focus ACOA communication behavior further? What steps can be taken to heighten personal awareness of this behavior? How might dysfunctional communication patterns be overcome? What techniques can be employed in the therapeutic setting to limit further damage and work toward interpersonal health and communication satisfaction?

From a broad perspective, this research generates some interesting questions concerning the impact other diseases such as muscular dystrophy, cancer or A.I.D.S. may have on the development and maintenance of family communication patterns. How might these diseases impact communication roles and rules? What changes might family communication networks undergo? What potential impact might terminal illness have on the development of communicator style in children of terminally ill parents? And how might these family communication patterns ultimately influence communicative competence and communication satisfaction for all members of the family system?

Conclusion

Alcoholism is an equal opportunity destroyer (Gravitz & Bowden, 1985) affecting all members of the alcoholic family system in a number of debilitating ways, not the least of which is reflected in family communication patterns. But unlike other fatal diseases the opportunity for recovery from alcoholism, for the alcoholic as well as the alcoholic family, is a significant one. A critical variable in the recovery process is interpersonal communication.

As an individual must recover from this disease through the departure from unhealthy behavior patterns and the establishment of new

health-giving patterns, so must family system members recover. Interpersonal communication interaction which served to keep the alcoholic family system together must be examined and realigned to meet the needs of system members as they strive to achieve a point of healthy equilibrium collectively and individually. It is hoped that the identification and evaluation of a particular communicator style exhibited by adult children of an alcoholic family system will facilitate the recovery process.

References

Ackerman, R. J. (1983). Children of alcoholics (2nd ed.). Holmes Beach, Florida: Learning Publications, Inc.

Albon, J. (1976). Family structure and behavior in alcoholism; a review of the literature. In B. Kissin & H. Begleiter (Eds.), Biology of alcoholism: Vol. 4. Social aspects of alcoholism (pp. 205-242). New York: Plenum.

American Medical Association (1977). Manual on alcoholism (3rd ed.).

Bales, R. (1970). Personality and interpersonal behavior. New York: Holt, Rinehart & Winston.

Black, C. (1979). Children of alcoholics. Alcohol Health & Research World, 4, 23-37.

Black, C. (1981a). Innocent bystanders at risk: The children of alcoholics. Alcoholism, 1 (3), 22-26.

Black, C. (1981b). It will never happen to me! Denver, Colorado: M.A.C. Printing and Publications Division.

Bosma, W.G.H. (1972). Children of alcoholics - a hidden tragedy. Maryland State Medical Journal, 21, 34-36.

Chafetz, M.E., Blane, H.T., & Hill, M. (1971). Children of alcoholics - observations in a child guidance clinic. Quarterly Journal of Studies on Alcohol, 32, 687-698.

Cork, R.M. (1969a). Alcoholism and the family. Toronto: Addiction Research Foundation.

Cork, R.M. (1969b). The forgotten children: A study of children with alcoholic parents. Toronto: Addiction Research Foundation.

Downs, W.R. (1982). Alcoholism as a developing family crisis. Family Relations, 31, 5-12.

Fine, E.W., Yudin, L.W., Holmes, J. & Heinemann, S. (1976). Behavioral disorders in children with parental alcoholism. New York Academy of Sciences Annals, 273, 507-517.

Finley, B.G. (1983). The family and substance abuse. In G. Bennett, C. Vourakis, & D. Woolf (Eds.), Substance abuse (pp. 119-134). New York: John Wiley & Sons.

Fox, R. (1962). Children in the alcoholic family. In W.C. Bier (Ed.), Problems in addiction: Alcohol and drug addiction (pp. 71-96). New York: Fordham University Press.

Franks, D.D., & Thacker, B.T. (1979). Assessing familial factors in alcoholism from MMPI profiles. American Journal of Psychiatry, 136 (8), 1084 - 1085.

Goodwin, D.W. (1981). Family studies of alcoholism. Journal of Studies on Alcohol, 42 (1), 156-162.

Gorad, S.L. (1971). Communication styles and interaction of alcoholics and their wives. Family Process, 10 (4), 475-489.

Gravitz, H.L., & Bowden, J.D. (1985). Guide to recovery. Florida: Learning Publications, Inc.

Greenleaf, J. (1981). Co-alcoholic and para-alcoholic: Who's who and What's the difference? Paper presented at the National Council on Alcoholism 1981 Annual Alcoholism Forum, New Orleans, Louisiana, April 12, 1981.

Haber, R. (1983). The family dance around drug abuse. The Personnel and Guidance Journal, 61 (7), 428-431.

Jackson, J.K. (1956). The adjustment of the family to alcoholism. Marriage and Family Living, 18, 361-369.

Jacob, T., Favorini, A., Meisel, S.S., & Anderson, C.M. (1978). The alcoholic's spouse, children and family interactions. Journal of Studies on Alcohol, 39 (7), 1231-1251.

Johnson Institute (1972). Alcoholism, a treatable disease. Minneapolis Mn: The Johnson Institute, Inc.

Lawson, G., Peterson, J.S., & Lawson, A. (1983). Alcoholilsm and the family. Maryland: Aspen Systems Corporation.

Leary, T. (1957). Interpersonal diagnosis of personality. New York: Ronald.

Lieberman, M., Yalom, I. & Miles, M. (1973). Encounter groups: First facts. New York: Basic Books.

Mann, R., Gibbard, G. & Hartman, J. (1967). Interpersonal styles and group development. New York: John Wiley.

McCord, J. (1972). Etiological factors in alcoholism: Family and personal characteristics. Quarterly Journal of Studies on Alcohol, 33, 1020-1027.

McLaughlin, M.L. (1980). Discriminant analysis in communication research. In P.R. Monge & J.N. Cappella (Eds.), Multivariate techniques in human communication research (pp. 175-204). New York: Academic Press.

Nardi, P.M. (1981). Children of alcoholics: A role - theoretical perspective. The Journal of Psychology, 115, 237-245.

Newall, N. (1950). Alcoholism and the father-image. Quarterly Journal of Studies on Alcohol, 11, 92-96.

Norton, R.W. (1978). Foundation of a communicator style construct. Human Communication Research, 4 (2), 99-112.

Norton, R.W. (1983). Communicator style. Beverly Hills: Sage.

Orme, T.C., & Rimmer, J. (1981). Alcoholism and child abuse. Journal of Studies on Alcohol, 42 (3), 273-285.

Schutz, W. (1958). FIRO: A three-dimensional theory of interpersonal behavior. New York: Holt, Rinehart & Winston.

Wegscheider, S. (1981). Another chance. Palo, Alto, California: Science and Behavior Books, Inc.

Wilson, C. (1982). The impact on children. In J. Orford and J. Harwin (Eds.) Alcohol and the family (pp. 151-166). New York: St. Martin's Press, Inc.

Woititz, J.G. (1983). Adult children of alcoholics. Florida: Health Communications, Inc.

Wolin, S.J., Bennett, L.A., Noonan, D.L., & Teitelbaum, M.A. (1980). Disrupted family ritual: A factor in the intergenerational transmission of alcoholism. Journal of Studies on Alcoholism, 41 (3), 199-214.